

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998 -

Application or Docket Number

09/343736

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | SMALL | ENTITY | OR | | THAN ENTITY |
|--|---|-----------------------|------------------------------------|----------------------------------|--------|--|------------------|------|-----------------|------------------------|------|---------------------|------------------------|
| FOR | | | NUMBER FILED | | | NUMBER EXTRA | | | RATE | FEE | 7 | RATE | FEE |
| BASIC FEE | | | | | | | | | | 380.00 | OR | | 760.00 |
| TOTAL CLAIMS 3 | | | 4 | minus | 20= | • 21 | | | X\$ 9= | | OR | X\$18= | 378. |
| INDEPENDENT CLAIMS 9 minus 3 = * 7 | | | | | | 7 | | X39= | | OR | X78= | 546 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | | +130= | | OR | +260= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | ` | TOTAL | | OR | TOTAL | 1684 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | THAN |
| NDME | | REM. AF | AIMS AINING TER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . , | +3 | Minus | ** | 41. | = 2 | ı | X\$ 9= | | OR | X\$18= | 36. |
| | Independent | Independent + | | Minus | *** | TOTAL SIAN | = | | X39= | · | OR | X78= | |
| | TING! PRESE | INTATIC | IN OF MIC | LIPLE DEF | ENL | ENT CLAIM | | | +130= | | OR | +260= | |
| | Õ | | | | | | | L | TOTAL | | ' | TOTAL | 30. |
| | | (Colu | ımn 1) | | (C | olumn 2) | (Column 3) | ~ | VDDIT. FEE | | | ADDIT. FEE | |
| AMENDMENT B | 7.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00 | REM/ | AIMS AINING TER DMENT | | . PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | otal | * | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent FIRST PRESE | * | 1 | Minus | ENIO | ENT CLAIM | = | | X39= | | OR | X78= | |
| | THOTPALSE | MANO | IN OF MIC | LIIPLE DEF | EIND | ENT CLAIM | | | +130= | | OR | +260= | |
| | | | | | | | | | | | OR , | TOTAL ADDIT. FEE | |
| . 1 | | | mn 1) | | | olumn 2) HGHEST | (Column 3) | | | | | | |
| AMENDMENT C | | REMA AF | INING TER DMENT | | PR | NUMBER EVIOUSLY AID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDN | Total | * | | Minus | ** | | = | ſ | X\$ 9= | | or I | X\$18= | 1/ |
| AME | Independent | | | Minus | *** | | = | _ - | X39= | | ŀ | X78= | |
| | FIRST PRESE | NTATIO | N OF MU | LTIPLE DEP | END | ENT CLAIM | - · | H | | | OR | | |
| • t | f the entry in colur | nn 1 is le | ss than the | entry in colur | nn 2 - | write "O" in coli | ົ ເ ກດ ີສ | L | +130= | | OR | +260= | |
| ** | If the "Highest Nur If the "Highest Nur The "Highest Nurn | nber Prev nber Pre | <i>r</i> iously Pai viously Pai | d For" IN THIS d For" IN THIS | SPA | CE is less than CE is less than | 20, enter "20." | | TOTAL DDIT. FEE | | | TOTAL DDIT. FEE | |